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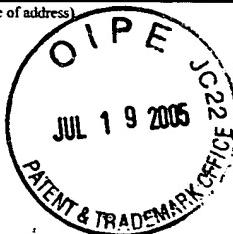
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 04/19/2005

BiTMICRO NETWORKS, INC.
ATTN: LEGAL DEPARTMENT
45550 NORTHPORT LOOP EAST
FREMONT, CA 94538

07/20/2005 GWORD0F2 00000041 09819515

01 FC:2501 700.00 OP



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(Depositor's name)

(Signature)

(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09819,515 | 03/27/2001 | Ricardo H. Bruce | BIT011 | 2817 |

TITLE OF INVENTION: METHOD AND APPARATUS FOR DATA RECOVERY

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | YES | \$700 | \$0 | \$700 | 07/19/2005 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|------------------------|----------|----------------|
| LEROUX, ETIENNE PIERRE | 2161 | 707-202000 |

| | |
|---|---|
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |
| <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | <u>1 Shabneez Kotadia</u> <u>2 Stephen Uriarte</u> <u>3 Mikio Ishimaru</u> |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

BiTMICRO Networks, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Fremont, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

- Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies _____

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 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Shabneez Kotadia

Date 7/15/05

Typed or printed name Shabneez Kotadia

Registration No. 53,153

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